

PTO/SB/01 (03-01)
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OR

PATEN	DECLARATION FOR UTILITY DESIGN PATENT APPLICATION (37 CFR 1.63)					
Declaration	X Declaration					

Submitted with Initial Filing OR

Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))

e	ed to respond to a collection of information unless it contains a valid OMB control number						
Attorney Docket Number		nber	INNOFF 3.0-013				
	First Named Inventor		Odd N. Oddsen, Jr.				
COMPLETE IF KNOWN							
	Application Number	10/061,880					
	Filing Date	2/1/02 3632					
	Group Art Unit						
	Examiner Name	Not Yet Assigned					

	required) Examine		niner Name Not Yet Assigned						
As a below named inventor, I hereby declare that:									
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the									
IIIVerraiori ericaed.	invention entitled:								
MODULAR MOL	MODULAR MOUNTING ARM								
the specification of w	(Title of the Invention)								
is attached her									
OR									
x was filed on (M	IM/DD/YYYY) 2/1/02	as United States	Application Nu	mber or PCT					
Application No.	10/061,880 and wa	as amended on (MM/DD	/YYYY)		(if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy Attached?					
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES	NO				
Additional foreig	gn application numbers are listed	on a supplemental priorit	y data sheet PT	O/SB/02B att	ached hereto:				

X

City

	a plus sign (+) inside this box	persons are requi	ired to resp	U.S ond to	. Patent and Trade	mark Office: U.S. DF	PARTM	PTO/SB/01 (03-01 002. OMB 0651-003; ENT OF COMMERCE d OMB control number
	DECLARATIO	N — Util	ity or	· De	esign Pat	ent Appli	catio	on
POWER OF transact all b	ATTORNEY: As a named invent usiness in the Patent and Traden	tor, I hereby appoir nark Office connec	nt the follow ted therew	wing r	egistered practition Customer Number (ner(s) to prosecute th	is applica	tion and to
Direct all corr	Direct all correspondence to: X Customer Number or Bar Code Label 000530 OR Correspondence address below							
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Country Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements								
may jeopard	dize the validity of the application	ation or any pate	t, or both ent issued	ther	eon.	11 and that such w	rilltul tais	se statements
NAME OF S	SOLE OR FIRST INVENTOR	č :			A petition h	nas been filed for this	unsigned	d inventor
Given Name (first and middle [if any])		Odd N.			Family Name or Surname	Oddsen, Jr.		Jr.
Inventor's Signature	all &	4			,	Date M Nich	18	2002
Residence: C	Easton	PA State	Country			Citizenship	US	
Mailing Address:	2100 Liberty Street							
Easton City s		PA State			042	Country		
NAME OF S	ECOND INVENTOR:				A petition h	as been filed for this	unsigned	l inventor
Given Name (first and middle [if any])				Family Name or Surname				
Inventor's Signature						Date		
Residence: C	ity	State	Country			Citizenship		
Mailing Address:								

ZIP

Country

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

State

Additional inventors are being named on the